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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture	Sean First name A Middle name Fleming	First name Middle name
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3579	

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Case number (if known)

Debtor 1 Sean A Fleming

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	9221 Albany Avenue Evergreen Park, IL 60805	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code Cook	Number, Street, City, State & ZIP Code		
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
Why you are choosing this district to file for bankruptcy		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Document Case number (if known) Debtor 1 Sean A Fleming

7.	The chapter of the Bankruptcy Code you are				each, see <i>Notice Red</i> ge 1 and check the a		.C. § 342(b) for Individu	uals Filing for Bankruptcy
	choosing to file under	☐ Cha	apter 7					
		☐ Cha	apter 11					
		☐ Cha	apter 12					
		■ Cha	apter 13					
8.	How you will pay the fee	a	about how yo	entire fee when I file my petition. Please check with the clerk's office in your local court for more u may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or attorney is submitting your payment on your behalf, your attorney may pay with a credit card or che address				
				bay the fee in installments. If you choose this option, sign and attach the Application for Individuals Fee in Installments (Official Form 103A).				
			J	that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a ju				
		_ k	out is not requapplies to you	uired to, waive you or family size and y	r fee, and may do so ou are unable to pay	only if your inco	me is less than 150% of	of the official poverty line that his option, you must fill out
).	Have you filed for bankruptcy within the	□ No.						
	last 8 years?	Yes						
			District	ilnbke		8/20/14	Case number	14-30653
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	■ No						
	affiliate?		-				5	
			Debtor		\\/han		Relationship to y	
			District Debtor		When		Case number, if Relationship to y	
			District		When		Case number, if	
			District		vviicii		Oddo Hamber, II	
11.	Do you rent your residence?	■ No.	Go to li	ne 12.				
		☐ Yes	Has yo	ur landlord obtaine	d an eviction judgme	nt against you a	nd do you want to stay	in your residence?
		L les						
		L Tes		No. Go to line 12.				

Document Page 4 of 65 Case number (if known) Debtor 1 Sean A Fleming Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Sean A Fleming Document Page 5 of 65

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case 17-09606 Desc Main Document Page 6 of 65 Case number (if known) Debtor 1 Sean A Fleming Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sean A Fleming Signature of Debtor 2 Sean A Fleming

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on March 27, 2017

MM / DD / YYYY

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Debtor 1 Sean A Fleming Page 7 01 05 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -	G. Stahulak Attorney for Debtor	Date	March 27, 2017 MM / DD / YYYY				
Thomas G.	Stahulak						
Stahulak & Firm name	Stahulak & Associates, L.L.C. / GetFiled						
Chicago, IL	son Blvd., Suite 652 - 60604 City, State & ZIP Code						
Contact phone	(312) 662-1480	Email address	ecf@stahulakandassociates.com				
6288620	rata		<u></u>				

		Docume	ent Page 8 of 6	<u>.5</u>	_
Fill in this inform	nation to identify your	case:			
Debtor 1	Sean A Fleming	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number(if known)					☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,622.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	9,622.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	7,400.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	124,239.62
	Your total liabilities	\$	131,639.62
Par	t 3: Summarize Your Income and Expenses	1	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,392.82
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,072.82
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	hedules.
7.	Yes What kind of debt do you have?		
	Vous debte are primarily concurred debte. Concurred debte are those "incurred by an individual primarily for		L. Caracillar and

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

2,648.88

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$_	7,507.32
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	7,507.32

		Document	Page 10 of 65		
Fill in this info	rmation to identify your case	and this filing:			
Debtor 1	Sean A Fleming				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the: NOF	RTHERN DISTRICT OF ILL	INOIS		
Case number					☐ Check if this is an
					amended filing
Official Fo	orm 106A/B				
Schedu	le A/B: Propert	ty			12/15
think it fits best. Information. If mo Answer every que	separately list and describe item Be as complete and accurate as ore space is needed, attach a sep estion. e Each Residence, Building, Land	possible. If two married peop arate sheet to this form. On t	ole are filing together, both a che top of any additional pag	re equally responsible for s	supplying correct
1. Do you own o	r have any legal or equitable inter	est in any residence, buildin	g, land, or similar property?		
■ No. Go to Pa	art 2.				
_	e is the property?				
Part 2: Describ	e Your Vehicles				
	ase, or have legal or equitable				
3. Cars, vans, t □ No ■ Yes	trucks, tractors, sport utility v	vehicles, motorcycles			
3.1 Make:	Mazda	Who has an interest in	the property? Check one		claims or exemptions. Put red claims on Schedule D:
Model:	Mazda 6 Hatchback	Debtor 1 only		Creditors Who Have Cla	aims Secured by Property.
Year: Approxim	2005 ate mileage: 147,000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2	2 only	Current value of the entire property?	Current value of the portion you own?
Other info	ormation:	At least one of the del	otors and another		
		Check if this is communicated (see instructions)	nunity property	\$4,850.00	\$4,850.00
No ☐ Yes Add the dol pages you here.	aircraft, motor homes, ATVs a bats, trailers, motors, personal value of the portion you on have attached for Part 2. Write e Your Personal and Household r have any legal or equitable i	vatercraft, fishing vessels, s wn for all of your entries e that number here	from Part 2, including an	y entries for	\$4,850.00 Current value of the portion you own?
					Do not deduct secured claims or exemptions.

6. **Household goods and furnishings** *Examples:* Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

	Case 17-09606	Doc 1	Filed 03/27/17 Document	Entered 03/27/17 16:02:44 Page 11 of 65 Case number (if know	Desc Main
Debtor 1	Sean A Fleming			Case number (if know	vn)
Yes.	Describe				
	Used pe	ersonal hou	sehold furniture and g	goods/items	\$100.00
■ No				oment; computers, printers, scanners; musi	c collections; electronic devices
Example ■ No	ibles of value les: Antiques and figurines; other collections, memo			oks, pictures, or other art objects; stamp, c	oin, or baseball card collections;
Example No	nent for sports and hobbie les: Sports, photographic, ex musical instruments		other hobby equipment;	bicycles, pool tables, golf clubs, skis; cano	es and kayaks; carpentry tools;
■ No	ms ples: Pistols, rifles, shotguns Describe	s, ammunitior	n, and related equipmen	t	
□ No	es ples: Everyday clothes, furs, Describe	, leather coat	s, designer wear, shoes	, accessories	
	Used pe	ersonal cloth	ning and accessories		\$500.00
■ No □ Yes. 13. Non-fa Examp ■ No □ Yes. 14. Any ot ■ No	ples: Everyday jewelry, cost Describe arm animals ples: Dogs, cats, birds, hors Describe	es old items you		ding rings, heirloom jewelry, watches, gem	
	the dollar value of all of yo art 3. Write that number he			ny entries for pages you have attached	\$600.00
	escribe Your Financial Assets	uitoble inter	oot in any of the fellow	ina?	Cuppent value of the
טס you ov	wn or have any legal or eq	uitable inter	est in any of the follow	ring ?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	ples: Money you have in you			osit box, and on hand when you file your pe	etition
Official For	m 106A/B		Schedule A/B: F	Property	page 2

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Case number (if known) Document Debtor 1 Sean A Fleming Cash on hand \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Bank of America \$500.00 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: □ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) retirement plan through employer - NO CASH \$1.00 SURRENDER VALUE 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

Institution name or individual: ☐ Yes.

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

☐ Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them...

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Case number (if known) Document Debtor 1 Sean A Fleming 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2016 Estimated tax refund (\$3651 estimated for earmed income credit) Federal \$3.651.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information..

art 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

for Part 4. Write that number here.....

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached

\$4.172.00

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Case number (if known) Document Debtor 1 Sean A Fleming 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$4,850.00 57. Part 3: Total personal and household items, line 15 \$600.00 Part 4: Total financial assets, line 36 58. \$4,172.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$9,622.00 \$9,622.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$9,622.00

		17/1/11111		
Fill in this infor	mation to identify your	case:		
Debtor 1	Sean A Fleming First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
Used personal household furniture and goods/items	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Used personal clothing and accessories	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
Ellie IIIII Genedale A.B. 11.1			100% of fair market value, up to any applicable statutory limit	
Cash on hand Line from Schedule A/B: 16.1	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
Ellie II olii ooneaale / v B. To. T			100% of fair market value, up to any applicable statutory limit	
Checking: Bank of America Line from Schedule A/B: 17.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Ellie IIIII Genedale A.B. 17.1			100% of fair market value, up to any applicable statutory limit	
401(k): retirement plan through employer - NO CASH SURRENDER	\$1.00		\$1.00	735 ILCS 5/12-1006
VALUE Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Sean A Fleming		Case number (if known)		
Brief description of the property and lin Schedule A/B that lists this property	ne on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption.		
Federal: 2016 Estimated tax refu (\$3651 estimated for earmed inc	33.051.00	\$3,651.00	735 ILCS 5/12-1001(g)(1)	
credit) Line from <i>Schedule A/B</i> : 28.1	Joine	☐ 100% of fair market value, up to any applicable statutory limit		
3. Are you claiming a homestead exe	•	5?		
` ,	nd every 3 years after that for ca	ases filed on or after the date of adjustmen	nt.)	
No				
☐ Yes. Did you acquire the proper	rty covered by the exemption wi	thin 1,215 days before you filed this case	?	
□ No				
Π Ves				

		Document	Page 17	of 65	_	
Fill in this infor	mation to identify you	ır case:				
Debtor 1	Sean A Fleming					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
(Spouse II, IIIIIIg)	i iist ivaine					
United States Ba	ankruptcy Court for the:	: NORTHERN DISTRICT OF IL	LINOIS			
Case number _ (if known)						if this is an ded filing
Official Forr	n 106D					
Schedule	D: Creditors	Who Have Claims	Secured	by Property	У	12/15
	e Additional Page, fill it o	If two married people are filing toget out, number the entries, and attach i				
. Do any creditors	s have claims secured by	y your property?				
☐ No. Chec	k this box and submit tl	his form to the court with your othe	er schedules. Yo	u have nothing else to	report on this form.	
Yes. Fill in	n all of the information	below.				
Part 1: List A	II Secured Claims					
for each claim. If n	nore than one creditor has	more than one secured claim, list the cr s a particular claim, list the other credito ical order according to the creditor's nar	ors in Part 2. As	Column A Amount of claim Do not deduct the	Column B Value of collateral that supports this	Column C Unsecured portion
2.1 Gateway	Financial	Describe the property that secures	the claim:	value of collateral. \$7,400.00	claim \$4,850.00	If any \$0.00
Creditor's Nam		2005 Mazda Mazda 6 Hatchb 147,000 miles	oack	. ,		
PO BOX 6	3010	As of the date you file, the claim is	: Check all that			
Saginaw,		apply. Contingent				
Number, Stree	t, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the do	ebt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as car loan)	s mortgage or secu	ured		
Debtor 2 only		_				
Debtor 1 and D	ebtor 2 only the debtors and another	☐ Statutory lien (such as tax lien, medium) ☐ Judgment lien from a lawsuit	echanic's lien)			
Check if this c		_	Purchase M	oney Security		
community de		Other (including a right to offset)				
Date debt was inc	curred	Last 4 digits of account nun	mber			
Add the dollar v	alue of your entries in C	column A on this page. Write that nur	mber here:	\$7,40	0.00	
If this is the last Write that numb		the dollar value totals from all pages	5.	\$7,40	0.00	
Part 2: List Ot	hers to Be Notified fo	or a Debt That You Already Lister	d			
trying to collect fr than one creditor	om you for a debt you o	e notified about your bankruptcy for owe to someone else, list the creditor t you listed in Part 1, list the addition nis page.	r in Part 1, and th	en list the collection ag	ency here. Similarly, if	you have more
	ber, Street, City, State & Z	Zip Code	On which	h line in Part 1 did you er	nter the creditor? 2.1	
6200 Sta	Financial te Street		l ast 4 di	igits of account number		
Suite 2	5.1001		Lust 4 ul	.g or account number _	_	

Official Form 106D

Saginaw, MI 48603

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Debtor	1 Sean A Flemi	ng		Case number (if know)
	First Name	Middle Name	Last Name	
(Name, Number, Stree Gateway Financia PO BOX 3257 Saginaw, MI 4860			On which line in Part 1 did you enter the creditor? 2.1 Last 4 digits of account number

		Document	Page 1	9 of 65	
Fill in th	is information to identify your	case:			
Debtor 1	Sean A Fleming				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
	•	NORTHERN DISTRICT OF IL	LINOIS		
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS		
Case nu	mber				
(if known)					Check if this is an amended filing
					amended ming
Officia	I Form 106E/F				
Sched	dule E/F: Creditors W	ho Have Unsecured	Claims		12/15
schedule schedule eft. Attacl ame and	G: Executory Contracts and Unexp D: Creditors Who Have Claims Sect h the Continuation Page to this pag case number (if known).	ired Leases (Official Form 106G). I ured by Property. If more space is e. If you have no information to re	Do not include needed, copy	any creditors with partially sthe Part you need, fill it out,	Property (Official Form 106A/B) and on secured claims that are listed in number the entries in the boxes on the cop of any additional pages, write your
Part 1:	List All of Your PRIORITY Un				
_	ny creditors have priority unsecure	d claims against you?			
	o. Go to Part 2.				
Dort Or	 -	V III a a a coma d'Olaima			
Part 2:	List All of Your NONPRIORIT				
	ny creditors have nonpriority unsec				
	o. You have nothing to report in this pa	art. Submit this form to the court with	your other sche	edules.	
Y	es.				
unse	one creditor holds a particular claim, li	/ for each claim. For each claim listed	d, identify what t	type of claim it is. Do not list cla	tor has more than one nonpriority aims already included in Part 1. If more claims fill out the Continuation Page of
					Total claim
4.1	Advocate Christ Medical Cent	er Last 4 digits of acc	ount number	2992	\$5,740.00
	Nonpriority Creditor's Name P.O. Box 4256	When was the deb	t incurred?		
	Carol Stream, IL 60197	When was the deb	i iliculi eu :		
	Number Street City State Zlp Code	As of the date you	file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and and	По	RIIY unsecure	1 claim:	
	\square Check if this claim is for a $$ comr $$ debt		na out of	aration agreement or divorce th	ant you did not
	s the claim subject to offset?	report as priority cla		ration agreement or divorce tr	iat you did fiot
	No	☐ Debts to pension	n or profit-sharin	ng plans, and other similar deb	ts
	☐ Yes	Other. Specify	medical		
•	-	- Other. Specify			

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Debt	or 1 Sean A Fleming	Case number (if know)	
4.2	Advocate Christ Medical Center	Last 4 digits of account number 7314	\$4,544.00
	Nonpriority Creditor's Name PO Box 4256	When was the debt incurred?	
	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.3	Advocate Medical Group	Last 4 digits of account number 9220	\$1,578.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	8550 W Bryn Mawr Avenue 8th Fl	when was the dept incurred?	
	Chicago, IL 60631		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical	
4.4	Advocate-South Suburban	Last 4 digits of account number 9479	\$1.00
	Nonpriority Creditor's Name 22091 Network Place	When was the debt incurred?	
	Chicago, IL 60673	= , , , , , , , , , , , , , , , , , , ,	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
		epoon,	

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Case number (if know)

DCDIOI	Seall A Fleming		
4.5	American Airlines FCU	Last 4 digits of account number 3123	\$1.00
	Nonpriority Creditor's Name ATTN: Bankruptcy Dept PO Box 619001 md 2100	When was the debt incurred?	
	DFW Airport, TX 75261 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	Arnoldharris	Last 4 digits of account number 1928	\$75.00
	Nonpriority Creditor's Name 111 West Jackson B Chicago, IL 60604	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify 04 Cook County Circuit Court	
4.7	Aurora Emergency Associates	Last 4 digits of account number 5404	\$1,006.00
	Nonpriority Creditor's Name P.O. Box 740023	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify medical	

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Debto	1 Sean A Fleming	Case number (if know)		
4.8	Bank of America	Last 4 digits of account number 6743	\$1.00	
	Nonpriority Creditor's Name PO Box 31900	When was the debt incurred?		
	Tampa, FL 33631 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	7.6 of the date you me, the stannie. Shook an that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.9	Blue Cross & Blue Shield of IL	Last 4 digits of account number	\$1.00	
	Nonpriority Creditor's Name		ψ1.00	
	Po Box 660044	When was the debt incurred?		
	Dallas, TX 75266 Number Street City State Zlp Code	As of the date varifile the claim in Charles II that such		
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	_			
	□ Debtor 1 only □ Contingent			
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not		
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes			
	Yes	Other. Specify		
4.1	Cda/pontiac	Last 4 digits of account number 2670	\$239.00	
	Nonpriority Creditor's Name			
	Attn:Bankruptcy	When was the debt incurred? Opened 1/01/11		
	Po Box 213			
	Streator, IL 61364 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Type of NONPRIORITY unsecured claim:			
		Student loans		
	☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you			
	Is the claim subject to offset?			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
		_ Collection Attorney Pronger Smith Clinic		
	□Yes	■ Other. Specify CLAIM		

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Case number (if know)

DCDIC	3ean A Fleming	Odse Humber (II know)	
4.1	Cerastes	Last 4 digits of account number	\$350.00
<u>. </u>	Nonpriority Creditor's Name C/O Weinstein & Riley P O Box 3978	When was the debt incurred?	
	Seattle, WA 98124 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	■ No □ Yes	report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CLAIM	
4.1	Cerastes	Last 4 digits of account number	\$295.00
	Nonpriority Creditor's Name C/O Weinstein & Riley P O Box 3978 Seattle, WA 98124	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify CLAIM	
4.1	Christ Hospital Nonpriority Creditor's Name	Last 4 digits of account number	\$50,000.00
	PO BOX 4256 Carol Stream, IL 60197	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other Specify medical	

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Case number (if know)

4.1 4	City of Chicago	Last 4 digits of account number	\$1,580.89
	Nonpriority Creditor's Name Department of Revenue PO BOX 88292	When was the debt incurred?	
	Chicago, IL 60680 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the daim is. Oneck all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify CLAIM	
4.1 5	City of Harvey	Last 4 digits of account number 1667	\$150.00
<u> </u>	Nonpriority Creditor's Name 15320 Broadway Harvey, IL 60426	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Parking ticket	
4.1 6	Compass Self Storage	Last 4 digits of account number 1036	\$1.00
	Nonpriority Creditor's Name 2556 Bernice Road	When was the debt incurred?	
	Lansing, IL 60438 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify	

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Case number (if know)

JUDIU	Sean A Fleming		Odsc Humber (II know)	
4.1 7	Fed Loan Serv	Last 4 digits of account number	0002	\$5,681.32
	Nonpriority Creditor's Name Pob 60610	When was the debt incurred?	Opened 4/01/11 Last Active 7/31/14	
	Harrisburg, PA 17106 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	☐ Other. Specify		
		Educational	CLAIM	
4.1				
3	Fed Loan Serv Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$1,826.00
			Opened 4/01/11 Last Active	
	Pob 60610 Harrisburg, PA 17106	When was the debt incurred?	7/31/14	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.		191 Onlook all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	■ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify		
		Educational		
4.1	Illinois Collection Service/ICS	Last 4 digits of account number	6874	\$1.00
	Nonpriority Creditor's Name Illinois Collection Service	When was the debt incurred?	Opened 7/01/13	
	Po Box 1010 Tinley Park, IL 60477			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
		Collection A	Attorney Advocate South Suburban	
	Yes	Other. Specify Hosp	•	

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Case number (if know)

DCDI	Sean A Fleming		
4.2 0	Illinois Emergency Medicine	Last 4 digits of account number 0424	\$1.00
	Nonpriority Creditor's Name PO Box 71402	When was the debt incurred?	
	Chicago, IL 60694 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Medical	
4.2	Illinois Tollway	Last 4 digits of account number	\$8,145.20
1	Nonpriority Creditor's Name	Last 4 digits of account number	Ψο, τ.το.2ο
	2700 Odgen Ave	When was the debt incurred?	
	Downers Grove, IL 60515 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is. Oneck all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify CLAIM	
4.2 2	Linebarger Goggan Blair & Sampson	Last 4 digits of account number 9189	\$768.60
	Nonpriority Creditor's Name PO Box 06152	When was the debt incurred?	
	Chicago, IL 60606 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Parking Tickets	

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Case number (if know)	
Last 4 digits of account number	\$1,729.25
When was the debt incurred?	V 1,1 = 51=5
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Deficiency for 2003 Ford Wind Star XL CLAIM	
Last 4 digits of account number	\$225.00
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
. ,	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Parking Tickets	
Local Adigita of account number 1297	\$1,000.00
Last 4 digits of account number	Ψ1,000.00
When was the debt incurred?	
As of the date year file, the plains in Chapter all that apply	
As of the date you file, the claim is: Check all that apply	
Contingent	
·	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
lacksquare Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify 04 Village Of Dolton CLAIM	
	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Deficiency for 2003 Ford Wind Star XL CLAIM Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Parking Tickets Last 4 digits of account number Unliquidated Disputed Type of NONPRIORITY unsecured claim: Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts

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Deblo	Sean A Fleming	Case number (if know)	
4.2	Oaklawn Radiology ImagingConsultant	Last 4 digits of account number 4254	\$1.00
	Nonpriority Creditor's Name 37241 Eagle Way	When was the debt incurred?	
	Chicago, IL 60678 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.2	Overlnd Bond	Last 4 digits of account number 3192	\$11,913.36
	Nonpriority Creditor's Name	Opened 2/23/10 Last Active	
	4701 W. Fullerton Ave. Chicago, IL 60639	When was the debt incurred? 1/06/11	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	■ Other. Specify Automobile CLAIM	
4.2	PayFlex Systems USA, Inc	Last 4 digits of account number 0442	\$1.00
	Nonpriority Creditor's Name Direct Billing Department PO BOX 14394	When was the debt incurred?	
	Lexington, KY 40512		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bill/Insurance	
	— 103	Utilet. Specify Modical Bill/Hodifation	

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Case number (if know)

DCDIO	Sean A Fleming	Case Hamber (ii know)				
4.2	Secretary of State	Last 4 digits of account number	\$1.00			
	Nonpriority Creditor's Name Compliance Dept 2701 S Dirksen Pkwy	When was the debt incurred?				
	Springfield, IL 62723 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify notice				
4.3	Southwest Gastroenterology	Last 4 digits of account number 2831	\$1.00			
	Nonpriority Creditor's Name 9221 Southwest Hwy Oak Lawn, IL 60453	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical				
4.3	Stellar Recovery Inc	Last 4 digits of account number 9402	\$1.00			
	Nonpriority Creditor's Name 4500 Salisbury Rd Ste 10 Jacksonville, FL 32216	When was the debt incurred? Opened 5/01/14				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Collection Attorney Comcast				

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Debt	or 1 Sean A Fleming	Case number (if know)	
4.3 2	Suburban Radiologists	Last 4 digits of account number 7331	\$1.00
	Nonpriority Creditor's Name 1446 Momentum Place Chicago, IL 60689	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.3	T-Mobile USA	Last 4 digits of account number	\$888.00
<u> </u>	Nonpriority Creditor's Name		
	PO BOX 742596	When was the debt incurred?	
	Cincinnati, OH 45296 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	76 of the date you me, the stammer officer air that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Service	
4.3			
4.3 4	Village of Evergreen Park	Last 4 digits of account number	\$25,000.00
	Nonpriority Creditor's Name 9418 S. Kedzie	When was the debt incurred?	
	Evergreen Park, IL 60805	Then was the dest modified.	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify tickets	

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Case number (if know)

	Coarry rionning		
4.3 5	Village of Evergreen Park	Last 4 digits of account number 3932	\$958.00
	Nonpriority Creditor's Name PO Box 1053	When was the debt incurred?	
	Mokena, IL 60448	when was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	_	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	☐ Yes	■ Other. Specify medical	
4.3			
6	VILLAGE OF SOUTH HOLLAND	Last 4 digits of account number	\$75.00
	Nonpriority Creditor's Name 16226 WAUSAU AVE	When was the debt incurred?	
	SOUTH HOLLAND, IL	When was the dept incurred:	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Fines	
4.3			
7	Williams & Fudge Inc	Last 4 digits of account number 7868	\$459.00
	Nonpriority Creditor's Name 300 Chatham Ave	When was the debt incurred?	
	Po Box 11590	When was the dept incurred:	
	Rock Hill, SC 29731		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify ashford university	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Sean A Fleming	Document Page	Case number (if know)
Name and Address Arnold Scott Harris P.C. 111 W Jackson Ste 600 Chicago, IL 60604	On which entry in Part 1 or Part 2 did y Line 4.14 of (<i>Check one</i>): Last 4 digits of account number	ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Christ Hospital & Medical Center Po Box 70508 Chicago, IL 60673	On which entry in Part 1 or Part 2 did y Line 4.13 of (Check one): Last 4 digits of account number	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address City of Chicago Department of Revenue PO BOX 88292 Chicago, IL 60680	On which entry in Part 1 or Part 2 did y Line 4.22 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address City of Harvey 15320 Broadway Harvey, IL 60426	On which entry in Part 1 or Part 2 did y Line 4.24 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Harris & Harris 111 W Jackson, #400 Chicago, IL 60604	On which entry in Part 1 or Part 2 did y Line 4.2 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims 9767
Name and Address Healthcare Financial Svcs Alcoa Billing Center 3429 Regal Dr Alcoa, TN 37701	On which entry in Part 1 or Part 2 did y Line 4.7 of (<i>Check one</i>): Last 4 digits of account number	/ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Pronger Smith MedicalCare 2320 W. High Street Blue Island, IL 60406	On which entry in Part 1 or Part 2 did y Line 4.10 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address T-Mobile T-Mobile Bankruptcy Team P.O. Box 53410 Bellevue, WA 98015	On which entry in Part 1 or Part 2 did y Line 4.33 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Trustmark Recovery Services 541 Otis Bowen Drive Munster, IN 46321	On which entry in Part 1 or Part 2 did y Line 4.26 of (Check one): Last 4 digits of account number	/ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address US Dept of Ed FedLoan PO Box 530210 Atlanta, GA 30353	On which entry in Part 1 or Part 2 did y Line 4.17 of (Check one): Last 4 digits of account number	vou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Village of Evergreen Park Traffic Compliance Administration 9420 S. Kedzie Avenue Evergreen Park, IL 60805	On which entry in Part 1 or Part 2 did y Line 4.34 of (<i>Check one</i>): Last 4 digits of account number	/ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Sean A Fleming	Document Page 33 of 65 Case number (if know)	
Name and Address Village of Evergreen Park PO BOX 438495 Chicago, IL 60643	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.34 of (Check one): Part 1: Creditors with Priority Unsecured C Part 2: Creditors with Nonpriority Unsecured	
51110dg0, 12 000 10	Last 4 digits of account number	
Name and Address Villege of South Holland	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.24 of (Check one): Part 1: Creditors with Priority Unsecured C	laims
16226 Wausau Ave South Holland, IL 60473	■ Part 2: Creditors with Nonpriority Unsecure	ed Claims
	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 7,507.32
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 116,732.30
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 124,239.62

		1700.000	11 FAUE 34 ULUS	
Fill in this infor	mation to identify your	case:		
Debtor 1	Sean A Fleming			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code					State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	J.,		State		

		Docume	ent Page 35 d	ot 65	
Fill in this	s information to identify your	case:			
Dobtor 1	Coon A Floring				
Debtor 1	Sean A Fleming First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fil	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
United Sta	ates bankruptcy Court for the.	- NORTHERN DISTRICT	OI ILLINOIS		
Case num	nber				
(if known)					☐ Check if this is an
					amended filing
Oπ: -:-	J Famos 40011				
	al Form 106H				
Sched	dule H: Your Cod	lebtors			12/15
	e and case number (if known you have any codebtors? (If			e as a codebtor.	
_					
■ No					
☐ Ye	S				
Arizo	thin the last 8 years, have you na, California, Idaho, Louisiana				
	. Go to line 3.	una ar lagal aguivalent live	with you at the time?		
⊔ те	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in lin Form	e 2 again as a codebtor only 106D), Schedule E/F (Officia column 2.	if that person is a guaran	tor or cosigner. Make	sure you have listed t 06G). Use Schedule D,	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Check all schedul	editor to whom you owe the debt es that apply:
					., ,
3.1				Schedule D, lir	ne
	Name			☐ Schedule E/F,	line
				☐ Schedule G, Iir	ne
	Number Street			<u> </u>	
	City	State	ZIP Code		
2.2				D Cole adula D P	
3.2	Name			Schedule D, lir	
				☐ Schedule E/F,	
				☐ Schedule G, lir	ıe
	Number Street	Ctata	710.0-4-		
	City	State	ZIP Code		

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Fill	in this information to identify your c	ase:							
Deb	Debtor 1 Sean A Fleming								
	otor 2				_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	T OF ILLINOIS						
(If kn	se number]			☐ An amende ☐ A suppleme	Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date:			
Official Form 106I						MM / DD/ YYYY			
S	chedule I: Your Inc	ome						12/15	
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filir	ng jointly, and your s th you, do not includ	pouse le infor	is liv mati	ing with you, incluon about your spo	ude information abouse. If more space i	ut your s needed,	
1.	Fill in your employment information.		Debtor 1			Debtor 2	Debtor 2 or non-filing spouse		
	If you have more than one job,	Employment status	■ Employed			☐ Emplo	☐ Employed		
	attach a separate page with information about additional employers.	Employment status	☐ Not employed			☐ Not e	☐ Not employed		
		Occupation	team lead						
	Include part-time, seasonal, or self-employed work.	Employer's name	S & S Activewear	S & S Activewear LLC					
	Occupation may include student or homemaker, if it applies.	Employer's address	581 Territorial Dr Bolingbrook, IL 60	0440					
		How long employed th	nere? 2 yrs						
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to re	port for	any	line, write \$0 in the	space. Include your r	on-filing	
	u or your non-filing spouse have mo e space, attach a separate sheet to		embine the information	for all	emple	oyers for that perso	n on the lines below.	If you need	
						For Debtor 1	For Debtor 2 or non-filing spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,		2.	\$	2,344.88	\$N/	<u> </u>		
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$ <u>N//</u>	<u>4</u>	

2,344.88

N/A

Calculate gross Income. Add line 2 + line 3.

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Debtor	11 _	Sean A Fleming			C	ase n	umber (if know	n)				
						For I	Debtor 1			Debtor filing s	2 or	
(Сору	line 4 here		4.		\$	2,344.8	8	\$		N/A	_
5. l	ist a	Il payroll deductions:										
		Tax, Medicare, and Social Secur	ity deductions	5a		\$	256.0	16	\$		N/A	
		Mandatory contributions for reti	-	5b		\$ 	0.0		\$		N/A	_
		Voluntary contributions for retire	•	5c		\$	0.0	_	\$		N/A	
5		Required repayments of retireme	•	5d	i.	\$	0.0	_	\$		N/A	_
5	ōе.	Insurance		5e) .	\$	0.0	_	\$		N/A	_
5	ōf.	Domestic support obligations		5f.		\$	0.0	0	\$		N/A	_
5	īg.	Union dues		5g	J.	\$	0.0	0	\$		N/A	_
5	5h.	Other deductions. Specify:		5h	1.+	\$	0.0	0	+ \$		N/A	_
6.	Add t	he payroll deductions. Add lines	5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$	256.0	6	\$		N/A	_
7. (Calcu	late total monthly take-home pay	Subtract line 6 from line 4.	7.	:	\$	2,088.8	2	\$		N/A	_
	За.	Il other income regularly received Net income from rental property profession, or farm Attach a statement for each proper receipts, ordinary and necessary b	and from operating a business, ty and business showing gross			•			•			
,		monthly net income.		8a		\$	0.0	_	\$		N/A	_
		Interest and dividends	ou, a non-filing spouse, or a depende	8b).	\$	0.0	0	\$		N/A	_
		regularly receive Include alimony, spousal support, of settlement, and property settlement	child support, maintenance, divorce	8c		\$	0.0		\$		N/A	_
		Unemployment compensation Social Security		8d 8e		\$	0.0	_	\$		N/A N/A	_
	3f.	Other government assistance the Include cash assistance and the va	alue (if known) of any non-cash assistar nps (benefits under the Supplemental			\$	0.0		\$		N/A	_
8	3g.	Pension or retirement income		8g	J.	\$	0.0	0	\$		N/A	_
			Estimated tax refund 2016,			•	204.0		•		NI/A	
8	3h.	Other monthly income. Specify:	averaged over 12 month	8h	1.+	\$	304.0		+ \$		N/A	_
9.	Add a	Ill other income. Add lines 8a+8b-	+8c+8d+8e+8f+8g+8h.	9.	\$		304.0	0	\$		N/	4
10 (Calcu	late monthly income. Add line 7	Fline 9	10.	\$	2	,392.82 +	\$		N/A	= \$	2,392.82
		ne entries in line 10 for Debtor 1 and			*-		,002.02	_				2,002.02
] [nclud other t	e contributions from an unmarried priends or relatives. t include any amounts already inclu	the expenses that you list in Schedu partner, members of your household, you ded in lines 2-10 or amounts that are n	our depe			,				÷ J. +\$	0.00
١		that amount on the Summary of Sc	ine 10 to the amount in line 11. The hedules and Statistical Summary of Ce							12.	\$	2,392.82
13. [Do yo	ou expect an increase or decrease No.	e within the year after you file this fo	rm?							Combi month	ned ly income
Г	_	Yes Explain:										

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Fill i	n this information to identify your case:					
Debt	or 1 Sean A Fleming			Checl	k if this is:	
Debt	or 2				An amended filing A supplement shov	ving postpetition chapter
(Spo	use, if filing)				13 expenses as of	
Unite	ed States Bankruptcy Court for the: NORTHI	ERN DISTRICT OF ILLIN	OIS	1	MM / DD / YYYY	
	e number					
(lf kn	nown)					
Of	ficial Form 106J					
	chedule J: Your Expen	SAS				12/1
Be a info	as complete and accurate as possible. rmation. If more space is needed, attac nber (if known). Answer every question	If two married people ar th another sheet to this	e filing together, both form. On the top of ar	are equa ny additio	Illy responsible fonds and pages, write y	r supplying correct
Part 1.	1: Describe Your Household Is this a joint case?					
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separa	te household?				
	☐ No☐ Yes. Debtor 2 must file Officia	ıl Form 106J-2, <i>Expenses</i>	s for Separate Househo	<i>ld</i> of Debto	or 2.	
2.	Do you have dependents? \square No					
	Do not list Debtor 1 and ☐ Yes. Debtor 2.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state the		son		9	■ No
	dependents names.		3011			□ Yes ■ No
			daughter		17	□ Yes
			aan (atudant)		24	□ No
			son (student)			■ Yes ■ No
			daughter		21	☐ Yes
						■ No
3.	Do your expenses include	.,	son			☐ Yes
0.	expenses of people other than	No Yes				
Esti expe	2: Estimate Your Ongoing Monthly mate your expenses as of your bankru enses as of a date after the bankruptcy licable date.	ptcy filing date unless y	you are using this form olemental <i>Schedule J</i> ,	n as a sup check the	oplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the
the	ude expenses paid for with non-cash g value of such assistance and have incl icial Form 106I.)				Your expe	enses
4.	The rental or home ownership expens payments and any rent for the ground or		nclude first mortgage	4. \$		500.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4a. Real estate taxes4b. Property, homeowner's, or renter's4c. Home maintenance, repair, and up			4a. \$ 4b. \$ 4c. \$		0.00 0.00 0.00

5. \$

0.00

Additional mortgage payments for your residence, such as home equity loans

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Debtor 1 Sean A Fleming Case number (if known)

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Debtor 1	Sean A Fleming	Case num	ber (if known)	
i. Utili	tios:			
6a.	Electricity, heat, natural gas	6a.	\$	350.00
6b.	Water, sewer, garbage collection	6b.		0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	160.00
6d.	Other. Specify:	6d.	*	0.00
	d and housekeeping supplies	7.	\$	400.82
	dcare and children's education costs	8.	\$	
		9.	\$	0.00
	hing, laundry, and dry cleaning		· -	100.00
	sonal care products and services	10.	\$	50.00
	ical and dental expenses	11.	\$	25.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	\$	220.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.		0.00
	ritable contributions and religious donations	14.	·	0.00
. Insu	•	17.	Ψ	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.	·	55.00
	Other insurance. Specify:	15d.	·	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		<u> </u>	0.00
Spe		16.	\$	0.00
	allment or lease payments:		<u> </u>	0.00
	Car payments for Vehicle 1	17a.	\$	187.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify:	17c.	*	0.00
	Other. Specify:	17d.	·	0.00
	r payments of alimony, maintenance, and support that you did not report		<u> </u>	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 10		\$	0.00
	er payments you make to support others who do not live with you.	,-	\$	0.00
Spec		19.		
. Othe	er real property expenses not included in lines 4 or 5 of this form or on S	chedule I: Yo	our Income.	
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
. Othe	er: Specify: Tuition	21.	+\$	25.00
	- Talkon		· •	20.00
	culate your monthly expenses			
	Add lines 4 through 21.		\$	2,072.82
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	-2	\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,072.82
				<u> </u>
	culate your monthly net income.	00	c	0.000.00
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	2,392.82
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,072.82
00	O historia and the company of the co			
23c.	Subtract your monthly expenses from your monthly income.	23c.	\$	320.00
	The result is your <i>monthly net income</i> .	200.	L	323.30
For e	You expect an increase or decrease in your expenses within the year afte example, do you expect to finish paying for your car loan within the year or do you expect fication to the terms of your mortgage? Io.			se or decrease because
ПУ				

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Fill in this infor	mation to identify your	case:			
Debtor 1	Sean A Fleming				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
O#: a: a!	100D				
Official For					
Declara	tion About a	ın Individua	I Debtor's So	chedules	12/15
If two married p	eople are filing together	, both are equally resp	onsible for supplying co	rrect information.	
Varr muset file th	ia farm urbanavar var fi	la hankuuntav aahadula	a ar amandad aabadula	a Making a falsa atatas	mont conceding property or
ohtaining mone	is form whenever you fi	le bankruptcy schedule	s or amended schedule:	s. Making a faise stater in fines un to \$250 000	ment, concealing property, or), or imprisonment for up to 20
	18 U.S.C. §§ 152, 1341, 1		iki uptoy case can result	III IIIIe3 up το ψ250,000	, or imprisonment for up to 20
•					
Sig	ın Below				
Did vou pa	av or agree to pay some	one who is NOT an atto	orney to help you fill out	bankruptcy forms?	
, ,	, , ,		, ,,	. ,	
■ No					
☐ Yes.	Name of person			Attach Bankı	ruptcy Petition Preparer's Notice,
				Declaration,	and Signature (Official Form 119)
Under pena	alty of periury. I declare	that I have read the sur	nmary and schedules fil	ed with this declaration	n and
	re true and correct.				
V /-/ O	A - - - - - - - - - -		v		
	an A Fleming		X Signature o	f Dobtor 2	
	A Fleming ure of Debtor 1		Signature o	DEDIOI Z	
Signate					
Date	March 27, 2017		Date		

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F20-	in this into	estion to identifica				
		ation to identify you	r case:			
Deb	otor 1	Sean A Fleming First Name	Middle Name	Last Name		
Deb	otor 2					
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	se number				-	check if this is an
					a	mended filing
<u> </u>	<i>.</i> –	407				
	ficial For					
Sta	atement	of Financial	Affairs for Indivi	duals Filing for E	Bankruptcy	4/10
					equally responsible for sup y additional pages, write you	
). Answer every que:		tins form. On the top of an	y additional pages, write you	ii name and case
Par	t 1: Give D	etails About Your Ma	rital Status and Where You	u Lived Before		
1.	What is your	current marital statu	ıs?			
••	_	our one marker state				
	☐ Married					
	■ Not marr	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	☐ Yes. List	all of the places you l	ived in the last 3 years. Do n	ot include where you live now	٧.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
3.					nity property state or territory	
state	es and territorie	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	evada, New Mexico, Puerto R	ico, Texas, Washington and W	/isconsin.)
	No					
	☐ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (C	Official Form 106H).		
Par	t 2 Explain	n the Sources of You	r Income			
_						
4.	Fill in the total	I amount of income yo	u received from all jobs and	ng a business during this y all businesses, including part /e together, list it only once u		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$5,063.05	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Document

Debtor 1 Sean A Fleming

				Debtor 1			Debt	or 2		
				Sources of income Check all that apply.	(bef	ss income ore deductions and usions)		ces of inc		Gross income (before deductions and exclusions)
	last calen nuary 1 to	idar year: December 3	31, 2016)	■ Wages, commissions, bonuses, tips		\$27,879.00		ages, com	missions,	
				☐ Operating a business				perating a	business	
For (Jai	the calen	dar year bef December 3	ore that: 31, 2015)	■ Wages, commissions, bonuses, tips		\$20,085.00		/ages, com	missions,	
				☐ Operating a business				perating a	business	
5.	Include include and other winnings. List each s	come regard public benef If you are fili	less of wheth it payments; p ng a joint cas ne gross inco	e during this year or the two er that income is taxable. Ex- pensions; rental income; intel e and you have income that y me from each source separa	amples rest; div you rec	of other income are a vidends; money collectived together, list it	alimony; cted fror only onc	n lawsuits; e under De	royalties; and ebtor 1.	ecurity, unemploymen d gambling and lottery
				Debtor 1			Debt	or 2		
				Sources of income Describe below.	eac (bef	ss income from h source ore deductions and usions)		rces of inc cribe below		Gross income (before deductions and exclusions)
Par	t 3: List	t Certain Pa	ments You	Made Before You Filed for	Bankrı	ıptcy				
6.	□ No.	Neither De individual puring the No. Yes * Subject to Debtor 1 or	btor 1 nor D rimarily for a 90 days befo Go to line 7. List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7. List below e include pay	ach creditor to whom you paiditor. Do not include paymer bayments to an attorney for the on 4/01/19 and every 3 year both have primarily consure you filed for bankruptcy, di	umer de lid you parties for contract of the lid you parties after umer de lid you parties de lid you parties de lid you parties after lid you parties afte	ebts. Consumer debose." pay any creditor a total of \$6,425* or more domestic support oblighruptcy case. that for cases filed or ebts. pay any creditor a total of \$600 or more an	in one of gations, or after all of \$60 d the total	ar more pay such as ch the date o o or more?	re? /ments and the control of adjustment. you paid that	ne total amount you nd alimony. Also, do
	Creditor'	's Name and	Address	Dates of payme	ent	Total amount		unt you	Was this p	payment for
						paid		still owe		

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Case number (if known) Debtor 1 Sean A Fleming

7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No	artners; relatives of any gen a control, or owner of 20% of	neral partners; partne or more of their voting	erships of which yo g securities; and a	ou are a genera ny managing a	al partner; corporations agent, including one for
	Yes. List all payments to an insider.	Data - (T-1-1	A 1	D (0.1
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No	<i></i>	ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment litor's name
	rt 4: Identify Legal Actions, Repossession					
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number					t or custody
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		erty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied? Value of the
		Explain what happene	d	2 4.0		property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No Yes. Fill in the details.		cluding a bank or fir	nancial institution	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes		erty in the possess			efit of creditors, a
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value	of more than \$60	00 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave lifts	Value
	Person to Whom You Gave the Gift and Address:					

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Case number (if known) Document Debtor 1 Sean A Fleming

14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or or		, , , ,	ns with a tota	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what you contributed		Dates you contributed	Value
Pai	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did y	you lose anyt	hing because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the least the amount that insurance has paid. Ince claims on line 33 of Schedule A/B:	List pending	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfer			.,,		
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No	preparir	ng a bankruptcy petition?			rty to anyone you
	Yes. Fill in the details.		Description and solve of any and		D-1	A
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
	STAHULAK & ASSOCIATES, L.L.C 53 W. Jackson Blvd., Suite 652 Chicago, IL 60604		\$350.00 (\$310.00 filing fee + \$10 + \$30 atty fee)	0 copy fee	3/18/17	\$350.00
	Green Path Debt Solutions 38505 Country Club Drive Farmington, MI 48331		\$35.00 Credit Counseling		3/21/17	\$35.00
17.	Within 1 year before you filed for bankrupromised to help you deal with your creed to not include any payment or transfer that the No	ditors o	r to make payments to your creditor		r transfer any prope	rty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have al No Yes. Fill in the details.	ur busin s made a	ess or financial affairs? as security (such as the granting of a s		• •	
	☐ Yes. Fill in the details. Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts	Date transfer was made
	Person's relationship to you			paid in ex		

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Debtor 1 Sean A Fleming

19.	beneficiary? (These are often called asset-protect		y property to a	seir-settie	a trust or similar device o	if which you are a
	Yes. Fill in the details.					
	Name of trust	Description and va	alue of the prop	perty trans	ferred	Date Transfer was made
Pai	rt 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Sto	orage Unit	s	
20	Wishing the second seco	wara any financial ac		.manta ha	ld in versus name, es fessive	uu hanafit alaaad
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa	other financial accoun	nts; certificates	of deposi		, ,
	No					
	Yes. Fill in the details.					
		ast 4 digits of ccount number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, ar	ny safe dep	oosit box or other deposit	ory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than your	home within 1	year befor	e you filed for bankrupto	y?
	_					
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?
Pai	rt 9: Identify Property You Hold or Control for	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ide any propert	y you borr	owed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name	Where is the prop	ortv2	Describe	the property	Value
	Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe	trie property	value
Pai	rt 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface	water, ground			
	Site means any location, facility, or property at to own, operate, or utilize it, including disposa	s defined under any e		aw, wheth	er you now own, operate	, or utilize it or used
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		as a hazardous	waste, ha	zardous substance, toxic	substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Sean A Fleming

24.	Has any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environm	ental law?
	No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	trative proceeding under any envir	onmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Conr	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy, d	lid you own a business or have an	y of the following connections to any	y business?
	☐ A sole proprietor or self-employed in a tr	rade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnershi	p (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing executi	ive of a corporation		
	☐ An owner of at least 5% of the voting or	equity securities of a corporation		
	No. None of the above applies. Go to Part 1	12.		
	☐ Yes. Check all that apply above and fill in th	ne details below for each business	<u>.</u>	
		scribe the nature of the business	Employer Identification numbe	
	Address (Number, Street, City, State and ZIP Code)	ne of accountant or bookkeeper	Do not include Social Security Dates business existed	number of ITIN.
28.	Within 2 years before you filed for bankruptcy, d institutions, creditors, or other parties.	lid you give a financial statement to	o anyone about your business? Incl	ude all financial
	■ No □ Yes. Fill in the details below.			
		e Issued		
	(realisses, otroet, only, otate and AIF odde)			

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Debtor 1 Sean A Fleming

Part 12:	Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

/s/ Sean A Fleming	
Sean A Fleming Signature of Debtor 1	Signature of Debtor 2
Date March 27, 2017	Date
Did you attach additional pages to You	Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
☐ Yes	
Did you pay or agree to pay someone w	ho is not an attorney to help you fill out bankruptcy forms?
■ No	
■ NO	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Debtor's attorney received \$350.00 from Debtor(s) prior to filing of the case as an advanced payment in compensation of (1) analysis of financial situation; (2) consultation on various bankruptcy and non-bankruptcy options; (3) preparation of documents; (4) payment of filing fees; and, when applicable (5) payment of costs of credit report fees.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$30.00 toward the flat fee, leaving a balance due of \$3,970.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: March 27, 2017	• •	
Signed:		
/s/ Sean A Fleming	/s/ Thomas G. Stahulak	
Sean A Fleming	Thomas G. Stahulak 6288620	
	Attorney for the Debtor(s)	
Debtor(s)		
Do not sign this agreement if the amount	ts are blank.	

Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	e Sean A Fleming		Case No.	
	<u>_</u>	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPI	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fit be rendered on behalf of the debtor(s) in contemplation	ling of the petition in bankruptcy	, or agreed to be paid	l to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,000.00
	Prior to the filing of this statement I have received	d	\$	30.00
	Balance Due		\$	3,970.00
2.	\$_310.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my la				nbers and associates of my law firm.
	☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the manner.			
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:			
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. 			
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.			ef from stay actions or any other
		CERTIFICATION		
	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	any agreement or arrangement for	or payment to me for	representation of the debtor(s) in
Λ	March 27, 2017	/s/ Thomas G. Sta	ahulak	
Date		Thomas G. Stahu	ılak 6288620	
		Signature of Attorn Stahulak & Assoc	ey ciates, L.L.C. / GetF	Filed
		53 W. Jackson Bl	lvd., Suite 652	
		Chicago, IL 6060 (312) 662-1480	₄ Fax: (312) 268-732	8
		ecf@stahulakand	` '	
		Name of law firm		

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United States Bankruptcy Court Northern District of Illinois

In re	Sean A Fleming		Case No.		
		Debtor(s)	Chapter 13		
	VERIFICATION OF CREDITOR MATRIX				
		Number of Creditors:			
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	March 27, 2017	/s/ Sean A Fleming Sean A Fleming Signature of Debtor			

Advocate Christ Medical Center P.O. Box 4256 Carol Stream, IL 60197

Advocate Christ Medical Center PO Box 4256 Carol Stream, IL 60197

Advocate Medical Group 8550 W Bryn Mawr Avenue 8th Fl Chicago, IL 60631

Advocate-South Suburban 22091 Network Place Chicago, IL 60673

American Airlines FCU ATTN: Bankruptcy Dept PO Box 619001 md 2100 DFW Airport, TX 75261

Arnold Scott Harris P.C. 111 W Jackson Ste 600 Chicago, IL 60604

Arnoldharris 111 West Jackson B Chicago, IL 60604

Aurora Emergency Associates P.O. Box 740023 Cincinnati, OH 45274

Bank of America PO Box 31900 Tampa, FL 33631

Blue Cross & Blue Shield of IL Po Box 660044 Dallas, TX 75266

Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364

Cerastes C/O Weinstein & Riley P O Box 3978 Seattle, WA 98124

Christ Hospital PO BOX 4256 Carol Stream, IL 60197

Christ Hospital & Medical Center Po Box 70508 Chicago, IL 60673

City of Chicago Department of Revenue PO BOX 88292 Chicago, IL 60680

City of Harvey 15320 Broadway Harvey, IL 60426

Compass Self Storage 2556 Bernice Road Lansing, IL 60438

Fed Loan Serv Pob 60610 Harrisburg, PA 17106

Gateway Financial PO BOX 6919 Saginaw, MI 48608

Gateway Financial 6200 State Street Suite 2 Saginaw, MI 48603 Gateway Financial PO BOX 3257 Saginaw, MI 48605

Harris & Harris 111 W Jackson, #400 Chicago, IL 60604

Healthcare Financial Svcs Alcoa Billing Center 3429 Regal Dr Alcoa, TN 37701

Illinois Collection Service/ICS Illinois Collection Service Po Box 1010 Tinley Park, IL 60477

Illinois Emergency Medicine PO Box 71402 Chicago, IL 60694

Illinois Tollway 2700 Odgen Ave Downers Grove, IL 60515

Linebarger Goggan Blair & Sampson PO Box 06152 Chicago, IL 60606

Metropolitan Auto Lending 103 East 147th Street Harvey, IL 60426

Municipal Collection Services, Inc. PO BOX 327 Palos Heights, IL 60463

Municollofam 3348 Ridge Road Lansing, IL 60438

Oaklawn Radiology ImagingConsultant 37241 Eagle Way Chicago, IL 60678

Overlnd Bond 4701 W. Fullerton Ave. Chicago, IL 60639

PayFlex Systems USA, Inc Direct Billing Department PO BOX 14394 Lexington, KY 40512

Pronger Smith MedicalCare 2320 W. High Street Blue Island, IL 60406

Secretary of State Compliance Dept 2701 S Dirksen Pkwy Springfield, IL 62723

Southwest Gastroenterology 9221 Southwest Hwy Oak Lawn, IL 60453

Stellar Recovery Inc 4500 Salisbury Rd Ste 10 Jacksonville, FL 32216

Suburban Radiologists 1446 Momentum Place Chicago, IL 60689

T-Mobile T-Mobile Bankruptcy Team P.O. Box 53410 Bellevue, WA 98015

T-Mobile USA PO BOX 742596 Cincinnati, OH 45296

Trustmark Recovery Services 541 Otis Bowen Drive Munster, IN 46321

US Dept of Ed FedLoan PO Box 530210 Atlanta, GA 30353

Village of Evergreen Park 9418 S. Kedzie Evergreen Park, IL 60805

Village of Evergreen Park PO Box 1053 Mokena, IL 60448

Village of Evergreen Park Traffic Compliance Administration 9420 S. Kedzie Avenue Evergreen Park, IL 60805

Village of Evergreen Park PO BOX 438495 Chicago, IL 60643

VILLAGE OF SOUTH HOLLAND 16226 WAUSAU AVE SOUTH HOLLAND, IL

Villege of South Holland 16226 Wausau Ave South Holland, IL 60473

Williams & Fudge Inc 300 Chatham Ave Po Box 11590 Rock Hill, SC 29731